

TOWN OF LAKE PARK

535 Park Avenue
Lake Park, Florida 33403
Phone (561) 881-3318
Fax (561) 881-3323



Zoning Certificate

REQUEST FOR ZONING CONFIRMATION LETTER FOR NEW BUSINESS

ADMINISTRATIVE FEE OF \$85.00 DUE AT TIME OF SUBMITTAL. FEE IS NON-REFUNDABLE. APPLICANT HAS 60 DAYS TO COMPLETE PROCESS, OR YOU WILL BE REQUIRED TO RE-SUBMIT THE REQUEST. BUSINESSES OPERATING IN VIOLATION OF THE TOWN CODE OF ORDINANCES WILL BE SUBJECT TO ENFORCEMENT ACTIONS.

Date _____ LOCAL BUSINESS ADDRESS _____
(not applicable for businesses located out of Town)

() New Business () Ownership Transfer and/or Name Change () Location Transfer () Additional Business
(please include) _____:

Name of Business _____

Name of Business Owner _____

Business Address/Location _____

Mailing Address: _____

Business Telephone No. _____ Fax No. _____

Name of Property Owner _____ Telephone No. _____

Address of Property Owner _____

() Corporation () Partnership () Fictitious Name () Other: _____

IF A CORPORATION:

Name of Registered Agent _____ Telephone _____

Address of Registered Agent _____

State of Incorporation _____

State of Professional License: _____ Attach a copy.

IF A PROPRIETORSHIP/CONTRACTOR/PROFESSIONAL:

Name of Owner/Qualifier _____

Address: _____ Telephone No. _____

TYPE OF BUSINESS: _____

Explain Operation in detail _____

Unit Size (sq. ft.) _____ Maximum Number of Employees _____

Is this an accessory use to another business Yes () No ()

Number of parking spaces available to business _____

FOR OFFICIAL USE ONLY
TO BE COMPLETED BY ZONING CERTIFICATE STAFF

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

Documents needed to complete Zoning Certificate:

- ____ Certificate of Workman's Compensation or Proof of Exemption
(This applies only to the construction industry).
- ____ Copy of State of Florida License (if applicable)
- ____ Site Plan, Construction drawings, Landscaping, Signage (if applicable)

INSPECTIONS

Building Department	Approved ()	N/A ()	Date _____	Init _____
Fire Department	Approved ()	N/A ()	Date _____	Init _____
Public Works	Approved ()	N/A ()	Date _____	Init _____
Zoning	Approved ()	N/A ()	Date _____	Init _____

(to include landscaping, parking, height, setbacks where applicable)

Special exception _____ Waiver _____ Variance _____

Community Development Zoning Certificate Staff

By: _____ Title: _____ Date: _____

Paid \$ _____

FOR THE PALM BEACH POST

Legal Notice Advertisement Request Form

Notice Under Fictitious Name Law Pursuant to Section 865.09, Florida Statutes

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of

(Fictitious Name)

located at _____, in the County of Palm Beach, in the City of

(Address of Business)

_____, Florida ____ (zip code) intends to register the said name with the Division of Corporations of the
Florida

Department of State, Tallahassee, Florida.

Dated at West Palm Beach, Florida, this _____ day of _____, 2009.

(Print owner's name or name of corporation)

The above notice is to be published one time in The Palm Beach Post.

Cost of one time advertisement is **\$32.00**.

[THE FOLLOWING PAYMENT LANGUAGE IS OPTIONAL AND SUPPLIED AS A POSSIBLE EXAMPLE] Individuals must Prepay. Only Attorneys and Accountants in good credit standing with the newspaper will be billed.

Form and payment can be mailed-in, dropped off, faxed or e-mailed:

Mail this form with \$32.00 payment to:

The Palm Beach Post
Attn: Legal Advertising
2751 S. Dixie Highway
West Palm Beach, FL 33405

Drop off or Fax this form with \$32.00 payment to:

The Palm Beach Post
2751 S. Dixie Hwy. WPB FL 33405
Fax: 561-820-4340

E-mail: legals@pbpost.com

(Visa, MasterCard, Discover or American Express)	
Cardholder's Name (PRINT)	
Account No.	Expiration Date
Signature of Cardholder	

Proof of Publication will be sent to the name and address below

Law Firm or Accounting Firm (where applicable) _____

Contact Name: _____ Phone Number: _____

Address _____

City _____ State _____ Zip _____



The Town of Lake Park
Community Development Department

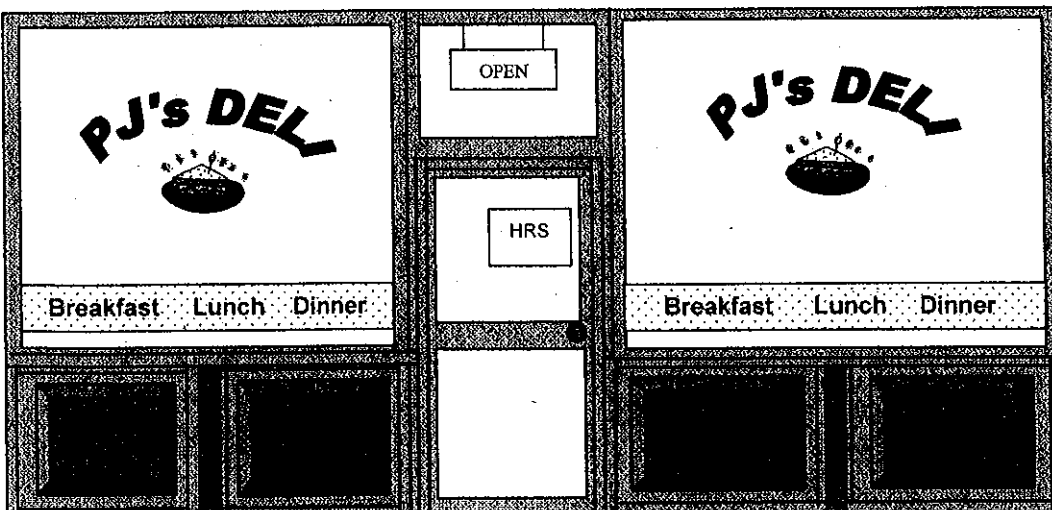
****Always inform within for other sign type permits****

WINDOW SIGNAGE

Pursuant to the NEW Town Code Section 70-103(5)(e):

- A PERMIT IS REQUIRED FOR ALL WINDOW SIGNAGE LOCATED ON OR WITHIN 15 FEET OF THE INTERIOR OF A BUILDING GLASS
- CONTENT: Business name, logo, address, telephone number, hours, open or closed, credit cards or a similar message that provides the customer with information about the business's operation and messages regarding goods and services for sale
- TYPE: Includes plastic signs, signs made of vinyl letters, painted or neon signs (interior illuminated or exposed unshielded light source). Stand alone lettering is discouraged. Paper, cardboard and hand-written signs are prohibited. Maximum of ONE Neon sign per business, with the exception of convenience stores that may have up to four "logo" neon signs that meet the allowable square footage (*with the exception of the Park Avenue Downtown District-PADD, where ONE Neon Sign per business still applies*).
- LOCATION: Can be painted, attached, or projected upon or within the exterior or interior of a building glass area, including doors. **An organized arrangement will be encouraged.**
- HEIGHT & SIZE: Maximum size is 25% of the glass area to which it is attached. Square footage will be added to other allowable business sign square footage. *The only exception is for properties located along Northlake Boulevard, whose size limit is the lesser of 20% of the glass area or 100 square feet.*
- TIME LIMIT: Permanent until modified, at which time a new permit is required.
- FEE: \$50 per application

ALL APPLICATIONS ARE SUBJECT TO THEIR OWN REVIEW AND APPROVAL.



Typical Store Front Window Sign Plan

For further info please
contact:

Town of Lake Park
Community
Development
Department
535 Park Avenue
Lake Park, FL 33403

561-881-3318

TAX COLLECTOR, PALM BEACH COUNTY
APPLICATION FOR PALM BEACH COUNTY BUSINESS TAX RECEIPT
(COUNTY ORDINANCE 72-1)

Account # _____

Receipt # _____

No business tax receipt shall be issued until applicable county and state laws are complied with including, but not limited to, building, zoning, construction industry licensing, fire control and health.

FICTITIOUS NAME REGISTRATION MUST ACCOMPANY THIS APPLICATION

BUSINESS INFORMATION:

Business Name _____

Start of Business Date _____

Business Address _____

Applicant Name _____

City/State _____ Zip _____

Corporation Name _____

Business Phone _____

Mailing Address (If Different) _____

*Federal Employer I.D.# _____

City/State _____ Zip _____

- OR - *Social Security # _____

Nature of Business _____

Maximum Number of: Employees _____ Machines _____ Rooms _____ Restaurant Seating _____

Were you issued a Notice of Non-Compliance? _____ Yes _____ No

I certify that the above information is true and correct, and I understand that any false statements could result in penalties as provided by law.

Signature _____ Title _____

PLEASE NOTE: ZONING APPROVAL MUST BE COMPLETED PRIOR TO RECEIPT ISSUANCE

*** See reverse side of this application for instructions ***

MUNICIPAL/CITY ZONING APPROVAL _____ Title _____

UNINCORPORATED/COUNTY ZONING APPROVAL _____

Legal Description of property (Property Appraiser 355-2866) _____

Section _____ Township _____ Range _____ Zoning _____

This business is presently served by:

Public Water _____ Public Sewer _____ Onsite Well _____ Septic Tank _____

1) Planning Building and Zoning

A. Zoning (U No.) _____

B. Compliance _____

C. Building _____

D. Zoning _____

E. Other _____

2) Fire Marshall _____

3) Health Department _____

4) Hotel & Restaurant _____

5) Prior Use of bay/bldg. _____

SIC Code _____

*** Signature and Title Designates Approval ***

OFFICE USE ONLY:

Class Code _____ Branch Office _____ Clerk _____

State License # _____

Field Service Approval _____ Date _____

INSTRUCTIONS FOR OBTAINING A BUSINESS TAX RECEIPT

Change of business location requires zoning approval, a new application, payment of a transfer fee and surrender of the current receipt.

Change of ownership requires proof of sale of business, a new application, payment of a transfer fee and surrender of the current receipt.

- 1) If your business is located inside municipal (city) limits, you must submit the application to the municipality in person for their approval. To determine whether your business is located within a municipality (city), contact the municipality nearest your business location.
- 2) If your business is located in the unincorporated area of Palm Beach County (outside the limits of a municipality), you must take a legal description of the property to: Planning, Building and Zoning Department, Vista Center, 2300 North Jog Road, West Palm Beach (233-5200) or 2976 State Road #15, Belle Glade (996-1650). Certain home based businesses may be exempt from this procedure.
- 3) Mail completed application with your check or money order to: Tax Collector, Palm Beach County, P.O. Box 3715, West Palm Beach, FL 33402-3715. Further information can be obtained by calling (561) 355-2272 or visiting our website: www.pbcgov.com/tax.

*** SPECIAL REQUIREMENTS FOR CERTAIN OCCUPATIONS ***

- A. If your profession or business is certified by the Department of Business and Professional Regulation (850-487-1395) or Department of Health (850-488-0595), you must attach a copy of your certification, registration, or license to this application.
- B. Banks, mortgage brokers, finance companies, and stockbrokers must be registered with the Office of Financial Regulation (850-410-9805) Attach a copy of the license showing proper business location to this application.
- C. Restauranters and mobile food unit operators must contact the Division of Hotel & Restaurants (850-487-1395). You must attach a copy of approved inspection report to this application or obtain an authorized signature on the face of this application.
- D. Child care must have the approval of the Palm Beach County Health Department (561-355-3018). You must attach a copy of the license to this application or obtain an authorized signature on the face of this application.
- E. Food outlets, auto repair, travel agencies, telemarketers, health and dance (ballroom) studios must submit a permit, registration or exemption from State of Florida, Dept. of Agriculture & Consumer Services (1-800-435-7352).
- F. Certified contractors must attach a copy of State of Florida and/ or Palm Beach County Certification. Call 233-5525 for certification information. County receipt is required, countywide municipal receipt is optional. You may submit a single check for both receipts.

BUSINESS TAX RECEIPTS MAY BE OBTAINED IN PERSON AT ANY OF THESE BRANCH OFFICES

Actac Building
3551 South Military Trail
Lake Worth, FL 33463

Governmental Center
301 North Olive Avenue
West Palm Beach, FL 33401

Northeast Courthouse Complex
3188 PGA Boulevard
Palm Beach Gardens, 33410

Glades Office Building
2976 State Road # 15
Belle Glade, FL 33430

Southeast Courthouse Complex
501 South Congress Avenue
Delray Beach, FL 33445

Mid-Western Communities Service Center
200 Civic Center Way
Royal Palm Beach, FL 33411

INSTRUCTIONS FOR COMPLETING THE ZONING CERTIFICATE AND BUSINESS TAX RECEIPT

PLEASE TEAR OFF AND KEEP

1. Zoning Certificate

You must apply for a zoning certificate BEFORE a business tax receipt. The purpose of the zoning certificate is to confirm that the proposed use is appropriate for the district that it is in and that all fire and building code requirements are met. The approved zoning certificate will include approvals from the zoning department, fire department and the building code department.

- i. Pay an **\$85.00** administrative fee.
- ii. Fill out the Zoning Certificate application (which includes the *Legal Notice Advertisement Request Form* for the Publication of the Fictitious Name; a copy of the publication will be required). You will then receive a white inspection slip that fire and building inspectors must sign indicating that you have passed those inspections.
- iii. Provide us with the County Business Tax Form and we will sign it for you to go to the county to get your county license. You must provide us with a copy of your approved county license before we will issue you a Business Tax Receipt.
- iv. Wait to hear from the building department that you have been approved for zoning. We will call you after we have reviewed your application. This can take 5 to 10 business days.
- v. Once you have received zoning approval schedule the fire inspection by calling 561-881-3318 at least one day in advance.
- vi. Schedule the building inspection by calling 561-881-3318 at least one day in advance. This can not be scheduled until the fire inspection has been completed.
- vii. If you pass the building and fire inspections return the signed white slip to the Building Department. You will receive confirmation that your zoning certificate is now approved.
- viii. You may now apply for your Business Tax Receipt.

❖ **Fire Inspection Tips:** Inspection is performed when the interior of the business is set up, right before you are ready to open. Required→One (1) Fire Extinguisher with a 2A10BC rating and a current tag, mounted where it is accessible. Call (561)881-3318 one day in advance to schedule inspection. A \$35.00 fee will be billed to you by the County.

❖ **Building Inspections Tips:** This immediately follows the passed Fire inspection. This is the last step in your Zoning Certificate. Call (561)881-3318 one day in advance to schedule inspection. Inspections are scheduled daily in the AM hours. If the inspection fails, a \$50.00 fee will apply for re-inspection.

2. **Business Tax Receipt:** To be submitted with the **applicable 'business code' fee**. Upon approval of your Zoning Certificate, submittal of this application is required. Upon submittal, this application shall include:

REQUIRED PAPERWORK

- **COPY of Newspaper Publication for Fictitious Name AND Fictitious Name Registration (FNR):** Filed through the State of Florida either by mail or online by visiting www.sunbiz.org . An FNR is not required IF (1) your first and last name is contained in the business name, or (2) if you have Articles of Incorporation and are using the same registered name for your business (a COPY of this registration is still required).
- **COPY of your State of Florida License (if applicable).** Lawyer, doctor, restaurants, day care centers, motor vehicle repair shop, mortgage broker, detective, etc.
- **COPY of your Palm Beach County Business Tax.**

****The Business Tax Receipt application will NOT BE ACCEPTED without ALL of the above paperwork** →**

****Once all is complete, your Lake Park Business Tax will be mailed to you****